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<b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b> Substitute for Form PTO-1360 (For use with Form PTO/SB/06)				Application Number <b>09/964,042</b>		Filing Date <b>26 September, 2001</b>		<input type="checkbox"/> To be Mailed					
				Applicant(s) <b>WEICHSELBAUM ET AL.</b>				Page 1 of 1					
* May be used for additional claims or amendments													
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 11/15/2007		AFTER SEC. AMENDMENT		*		*		*		
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
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12				1			62						
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Total Indep			1				Total Indep						
Total Depend				21			Total Depend						
Total Claims			22				Total Claims						

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